

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF MELISSA A. SIMPSON		COURT CASE NUMBER 09-2120-JPM
DEPENDANT BEHAVIOR SERVICE OF TENNESSEE		TYPE OF PROCESS Summons & Complaint
SERVE ➔ AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Behavior Service of Tennessee Registered Agent: Carlos Gonzales	
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 1155 Cully Road, Cordova, TN 38016	

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

Melissa A. Simpson
5363 Clinchport Circle
Memphis, TN 38127

Number of process to be served with this Form - 285

Number of parties to be served in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

Fold

Signature of Attorney or other Originator requesting service on behalf of:

THOMAS M. GOULD, CLERK
BY Deputy Clerk:

☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

901-495-1200

DATE

7/17/2009

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated.

(Sign only first USM 285 if more than one USM 285 is submitted)

Total Process

District of Origin

No. 76

District to Serve

No. 76

Signature of Authorized USMS Deputy or Clerk

Date

7/21/09

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Address (complete only if different than shown above)

Date of Service

7-23-09

Time

Signature of U.S. Marshal or Deputy

William E. Sauter

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
55.00		8.00	63.00			

REMARKS:

7-21-09 Cert. Fed Mail 70081830000228080625
 7-23-09 Return Receipt and receipt

SENDER COMPLETE THIS SECTION *

- Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

R/A- Carlos Gonzales
Behavior Service of TN
1155 Cully Road
Cordova, TN 38106

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ X☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7/22/09

D. Is delivery address different from item 1? ☐ Yes
if YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

7008 1830 0002 2808 0625

PS Form 3811, August 2001

Domestic Return Receipt

2ACPRI-03-Z-0985